

## PA 09-144 REGISTRATION FORM

PLEASE COMPLETE AND SIGN FORM

FILING FEE: \$100.00. PAYABLE TO TOWN OF REGISTRATION

Vacant Property Address: \_\_\_\_\_

Registrant / Owner: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Prefer to be contacted by (check one): U.S. Mail \_\_\_\_\_ Email: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

**If the above is a Corporation or Out of State Registrant**

**Please list In-state contact information below:**

Company / Contact: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

**Property Maintenance / Management Company (if applicable)**

Company / Contact: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

**REGISTRANT'S SIGNATURE:** \_\_\_\_\_